

# Network Link

August 2019



## Avoid the crowd and access after hours medical advice from home

Busy emergency rooms are not always your best option if you are sick or injured after hours.

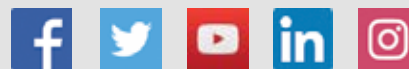
The timely reminder issued by Brisbane North PHN as part of the Emergency Alternatives campaign aims to increase the community's awareness of after hours medical services.

With emergency departments (ED) across Brisbane experiencing a surge of patients in recent months, Emergency Alternatives reminds patients to think twice before visiting the ED.

Brisbane North PHN Board Chair and GP Dr Anita Green said the campaign's message is as important now as it was when Emergency Alternatives first launched in 2016.

"It's a relevant message and now more than ever after hours medical advice is so easy to access. You can start by checking your symptoms or talking to a nurse—all without leaving your own home.

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# SICK OR INJURED AFTER HOURS?

Find help at  
[emergencyalternatives.org.au](http://emergencyalternatives.org.au)

**phn**  
BRISBANE NORTH  
An Australian Government Initiative

Pictured on page 1 and above: images from the 2019 Emergency Alternatives campaign

“Patients seeking after hours urgent medical care for minor ailments will find it is easier and usually a lot quicker to call an after hours GP, instead of waiting at busy hospitals,” she said.

Recent Queensland Health data shows there have been more than 4,800 influenza notifications in the Brisbane North and Moreton Bay region in 2019; four times the year to date average for the last five years.

Dr Green said these figures alone are a good reason to avoid the emergency department.

“With notification rates as high as they have been this year, the emergency department will be feeling the strain. The hospital ED is for patients needing emergency or life-saving treatment, so it’s best to avoid it if your condition could be better managed by a GP,” Dr Green said.

Metro North Hospital and Health Service Executive Director of Emergency Medicine and Access Coordination, Dr Chris May said patients who need acute care will always be prioritised, regardless of arrival time.

“Our clinicians and nurses can be exceptionally busy in winter due to flu presentations, winter sports injuries, respiratory infections, burns sustained from heaters, right through to things like poisoning, trauma and pain,” Dr May said.

**“The emergency department is always the best place in an emergency and while we are dedicated to seeing all patients and will not turn anyone away, if your situation is not an emergency, you may have to wait longer,” he said.**

Launched in June 2019, the campaign advertising directs people to a website where they can access the Health Direct symptom-checker, talk to a nurse, find a GP or make a plan for the next time someone in their household needs medical advice after hours.

**To visit the campaign website, go to**  
[www.emergencyalternatives.org.au](http://www.emergencyalternatives.org.au).

## ABOUT NETWORK LINK

For submissions and advertising or to subscribe, visit [brisbanenorthphn.org.au/page/publications](http://brisbanenorthphn.org.au/page/publications).

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Brisbane North PHN Integration team (pictured left to right): Clinical Editor Dr Fabian Jaramillo, Manager Jenny Hains, Coordinator Aurelie Larcher, HealthPathways Officer Louise Kluczkowski, Program Support Officer Tegan Carroll and General Practice Liaison Officer Dr John Bennett.

## HealthPathways milestone reached with 400 published pathways

The Brisbane North HealthPathways Program is a joint project between Brisbane North PHN and Metro North Hospital and Health Service. It offers clinicians concise clinical guidance along with referral and local services information to be used during the consultation.

The HealthPathways team are celebrating the impressive milestone of publishing 400 pathways since the web-based tool went live in 2017. These include over 200 clinical pathways localised for the North Brisbane and Moreton Bay region covering a wide range of specialties.

Over the past 12 months the HealthPathways website totalled more than 60,000 page views with the top five most viewed pathways being:

- routine antenatal care
- atrial fibrillation
- abnormal vaginal bleeding
- back pain
- anaemia and iron deficiency.

With the aim of encouraging networking and skill sharing between general practices and providing better access for patients, the team has also initiated a new information service to facilitate GP to GP referrals for procedures such as ear toilet or microsuction, mirena and implanon removal and insertion, iron infusion therapy, wedge resection / phenolisation and vasectomy.

HealthPathways recently went live with version 2.0 of the website, which is now mobile friendly and easier to read.

The following GP testimonials were taken from the 2019 Brisbane North PHN market research survey.

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“I used the Pathways to find out the exact things I had to do and to whom I refer – the patient got a very early quick appointment in the public system and it was a very good result.”

“I had a patient who needed to be referred to haematology. HealthPathways helped me to be aware of what further tests needed to be done before a comprehensive referral could be done.”

“I called the GP advice line for orthopedic conditions – I did not know it existed until I looked at HealthPathways.”

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**If you wish to organise a demonstration in your practice or to submit feedback about HealthPathways contact [administration.integration@brisbanenorthphn.org.au](mailto:administration.integration@brisbanenorthphn.org.au). Phone 07 3630 7300 for login details or request a login sticker from your practice PCLO.**





## Follow up care for older people who fall at home

A collaborative pilot project aiming to deliver a more coordinated and responsive approach to the management of older people who fall at home recently commenced.

*Community Falls Follow Up* commenced in June 2019, enables a coordinated and timely response to the management and prevention of falls in the older person living at home.

The pilot project is a partnership between Brisbane North PHN, Metro North Queensland Ambulance Service and Metro North Hospital and Health Service Community and Oral Health, which formed in response to a review of Metro North Queensland Ambulance data.

The data, gathered from July-December 2018, found ambulance crews responding to nearly 1,200 falls related callouts a month. Of these callouts, approximately half of the patients required transport to an emergency department for acute care assessment and management and half of the patients remained at home.

For the older person remaining at home, follow up care is ad-hoc and generally relies on the patient initiating contact with their primary care provider or other formal support service.

The pilot project will evaluate a new community falls response pathway during a six month trial, which focuses on older people living in The Prince Charles catchment who have fallen at home, require attendance by Queensland Ambulance Service but are not required to go to hospital.

The patient will be contacted to coordinate appropriate care responses and enact strategies to optimise their health, quality of life and prevent future falls and fall-related injuries. This care coordination will be facilitated by Team Care Coordination and Community and Oral Health.

Team Care Coordination accept referrals and complete home visit assessments with a high priority and clinical nurses work with the relevant GP to coordinate referrals and reduce the risk of further falls.

**For further information contact Team Care Coordination on 1800 250 502.**

# The importance of recognising frailty in primary care



**'Frailty' is a word that is used a lot when referring to the care of older people.**

By Dr Kristen Riley

To improve the response to frailty and support the use of a common language when identifying frailty across the sector, Metro North Hospital and Health Service is utilising the Clinical Frailty Scale (known as CFS) and will be encouraging referrers to apply the CFS to their patient prior to referral.

Studies have shown that 48 per cent of people over 85 die within one year of a hospital admission, and 10 days in a hospital bed leads to the equivalent of 10 years ageing in the muscles of people over 80.

Frailty is defined as a medical syndrome, which develops as consequence of *age-related decline* in many physiological systems and collectively results in vulnerability to sudden health status changes triggered by *minor stressor events*.

Once an older person has lost their physiological reserves, even minor isolated events, such as cystitis, can lead to geriatric syndromes such as falls, delirium, fluctuating disability, which can mean the difference between a person surviving, or continuing to function independently.

The frail older person, who is not recognised as such, often presents in a non-specific way, late and in crisis with a geriatric syndrome. Their care is often hospital-based, episodic, disruptive, disjointed and associated with poor health outcomes, such as higher mortality, risk of requiring residential care, hospitalisation and increased length of hospital stays.

Identifying frailty and responding in ways that are proactive, preventative and coordinated can modify frailty severity, reduce stressors and improve outcomes. There is proven benefit in performing a Comprehensive Geriatric Assessment and 75+ health assessment with interventions such as exercise, nutrition support, vaccination, managing polypharmacy and falls risk.

By recognising frailty and using a standardised tool, we can coordinate care and provide timely interventions in the community that result in long term benefits for older people. Our patients can live well with frailty.

.....  
*Dr Kristen Riley is a local GP and is working as a General Practice Liaison Officer supporting the Health Alliance's Ageing Well Initiative.*

*A focus of the Ageing Well Initiative is supporting general practice to recognise frailty and to improve how the health system better responds to older people.*

Pictured: Metro North Hospital and Health Service's Clinical Frailty Scale by K. Rockwood available via <http://bit.ly/MNHHS-CFS>.

For more information visit [www.healthalliance.org.au](http://www.healthalliance.org.au).

**Clinical Frailty Scale**

- 1 Very fit**  
People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age.
- 2 Well**  
People who have no active disease symptoms but are less fit than category 1. Often, they exercise or are very active occasionally, e.g. seasonally.
- 3 Managing well**  
People whose medical problems are well controlled, but are not regularly active beyond routine walking.
- 4 Vulnerable**  
While not dependent on others for daily help, often symptoms limit activities. A common complaint is being "knocked up", and/or being tired during the day.
- 5 Mildly frail**  
These people often have more evident slowing, and need help in high order tasks (finances, transportation, heavy household, medications). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation and housework.
- 6 Moderately frail**  
People need help with all outside activities and with keeping house. Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (e.g. standby) with dressing.
- 7 Severely frail**  
Completely dependent for personal care, from whatever cause physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~ 6 months).
- 8 Very severely frail**  
Completely dependent, approaching the end of life. Typically they could not recover even from a minor illness.
- 9 Terminally ill**  
Approaching the end of life. This category applies to people with a life expectancy < 6 months, who are not otherwise evidently frail.

**SCORING FRAILTY IN PEOPLE WITH DEMENTIA**

The degree of frailty corresponds to the degree of dementia. Common symptoms in mild dementia include: forgetting the details of a recent event, though still remembering the event itself, repeating the same question/story and social withdrawal.

In moderate dementia, recent memory is very impaired, even though they seemingly can remember their past life events well. They can do personal care with prompting.

In severe dementia, they cannot do personal care without help.

K. Rockwood et al. A global clinical measure of fitness and frailty in elderly people. *Journal of the American Medical Association* 2005; 293: 2955-2962.



## Upskilling the aged care workforce in dementia care

A project to upskill aged care workers caring for people with dementia has commenced in the Redcliffe Peninsula area.

*Enhance dementia care in residential aged care facilities* (RACF) in Redcliffe Peninsula is one of the six projects currently being implemented by Brisbane North PHN as part of the four year Integrated Model of Dementia Care Program.

Australia's Aged Care Workforce Strategy states that upskilling the aged care workforce is a priority to ensure the best possible care for older Australians.

The *Enhance dementia care* project has engaged Dementia Training Australia to deliver the training that includes face-to-face programs, online learning, access to resources and tools.

The training also includes mentoring and support on pain, responsive behaviours, medication management and environmental design.

Since the project commenced, four workshops have been delivered to staff from the 14 participating residential aged care facilities. Within the workshops, participants are provided with an opportunity to better understand dementia and explore the difficulties people living with dementia can experience in communication.

Workshops on 'Applying a problem solving approach to behaviours' will be delivered in July and August 2019.

**For more information about the training contact Sandra Jeavons via [s.jeavons@qut.edu.au](mailto:s.jeavons@qut.edu.au) or to participate in the project, contact Sharon Gavioli via [agedcareprojects@brisbanenorthphn.org.au](mailto:agedcareprojects@brisbanenorthphn.org.au).**





# When someone presents with thoughts of suicide

By Glen Wallwork  
Program Manager - Suicide Prevention at Wesley Mission Queensland

In 2017, 3,128 people died by suicide and Lifeline estimates there are approximately 65,000 suicide attempts each year in Australia.

Barriers may prevent a person with suicidal thoughts disclosing what they are experiencing but if health workers are aware of these barriers, such as the person feeling shame, they are more likely to be able to help them.

Normalising the experience and asking directly about suicide are important steps in identifying at risk patients. In some circumstances a person having thoughts of suicide may be referred to the emergency department however, there are many occasions where other options should be considered.

There is often a discrepancy between the help someone thinks they will receive at an emergency department and the support they actually do receive, which may lead to someone spending hours waiting in an emergency department before being discharged (quite possibly with a referral back to the GP) without any therapeutic intervention occurring.

For the person experiencing a suicidal crisis, bouncing from one place to another can increase feelings of hopelessness and distress. This experience may reduce the likelihood of reaching out for help in future and may also impact their immediate and future risk of suicide.

**Brisbane North PHN funds suicide prevention workshops for GPs, practice nurses and practice staff to enhance their skills and knowledge in identifying and supporting people who may be at risk of suicide.**

The workshop includes building a whole-of-practice approach to suicide and understanding referral pathways, safety planning and other strategies to enhance the patient's experience. These workshops are available at no charge to all health professionals.

**The final workshops for the year are being held in August and September.**

Refer to the Suicide Risk Pathway on HealthPathways for guidance on:

- identifying at risk patients
- how to ask at risk patients about suicidal ideation
- when and how to activate emergency management and the options for managing a patient in the community.

[bit.ly/HealthPathways\\_SR](http://bit.ly/HealthPathways_SR)

## Practice staff

**Thursday 8 August**

5.30 – 8pm  
Ashgrove Golf Club

**Thursday 12 September**

5.30 – 8pm  
Kedron Wavell Services Centre

## GPs and practice nurses

**Saturday 10 August**

9am – 4pm  
Ashgrove Golf Club

**Saturday 14 September**

9am – 4pm  
Kedron Wavell Services Centre

For more information on the workshops visit <http://bit.ly/suicidepreventionworkshops>.



## The PIP Quality Improvement Incentive has started

From 1 August 2019, general practices participating in quality improvement activities are eligible to receive the PIP Quality Improvement (QI) Incentive payment.

Under the PIP QI Incentive, general practices work with their local Primary Health Network (PHN) to undertake continuous quality improvement activities through the collection and review of practice data on specified improvement measures.

There are two components a general practice needs to meet to qualify for a PIP QI Incentive payment:

- 1. Participate in continuous quality improvement**
- 2. Provide the PIP eligible data set to your local PHN**

General practices can apply for the PIP QI Incentive online through Health Professional Online Services (HPOS) using their Provider Digital Access (PRODA) account.

The draft guidelines, improvement measures and data governance framework are now available to view on the Department of Human Services website.

The draft guidelines outline the much anticipated payment details; participating practices will receive \$5.00 per Standard Whole Patient Equivalent (SWPE) capped at \$12,500 per quarter.

**For further information on applying for the Practice Incentives Program visit <http://bit.ly/humanservices-PIP>.**

**For more information on the HPOS visit [humanservices.gov.au/hpos](http://humanservices.gov.au/hpos).**



Pictured from left to right: Brisbane North PHN Practice Development Officer Amie Horwood, practice nurse Noeleen Trotter, practice manager Kim Bullivant, Dr Vinod Lal and practice nurse Gavin Bullivant from Caboolture Indigenous and Community Medical.

## Enrolments are high for Health Care Homes trial

Brisbane North PHN has successfully enrolled 15 practices to participate in the Health Care Homes trial.

Health Care Homes patient enrolments closed on 30 June 2019, with a total of 10,343 patients enrolled nationally—and 1,203 patients enrolled regionally—who will be engaged in Health Care Homes until the trial ends in June 2021.

Brisbane North PHN would like to acknowledge the dedicated practices who worked with their practice development officers to achieve these outstanding results.

Caboolture Indigenous and Community Medical worked to increase their enrolments over eight months, eventually achieving more than 400 patient enrolments.

Beachmere Medical Centre took the initiative to create an expression of interest poster, which successfully gained the interest of patients in the waiting room.

Practices participating in the trial are now focusing on new and innovative models of care, utilising the health care homes neighbourhood and in particular engaging with their local pharmacists to implement the community pharmacy aspects of the trial.

**For more information contact Practice Development Officer, Manpreet Kooner via [manpreet.kooner@brisbanenorthphn.org.au](mailto:manpreet.kooner@brisbanenorthphn.org.au).**





## Handy hotline for mental health service navigation

An initiative of Brisbane North PHN, My Mental Health Service Navigators are a small team of health professionals standing by to assist callers to navigate the region's mental health services.

Consumers, carers, referrers and providers can contact the My Mental Health Service Navigators for information about mental health services and supports in the North Brisbane and Moreton Bay region.

The service navigators can provide referrals to PHN commissioned mental health services using the rediCASE

system. From 1 July 2019, the Mental Health Nursing in Brisbane North, Brisbane MIND and Partners in Recovery phones and faxes were redirected to the new service navigation number. Questions regarding the transition from these services are welcome.

The service navigation team are also responsible for the maintenance and development of [www.mymentalhealth.org.au](http://www.mymentalhealth.org.au), Brisbane North PHN's existing mental health website.

**To contact the My Mental Health Service Navigation team phone 1800 752 235 or email [navigation@brisbanenorthphn.org.au](mailto:navigation@brisbanenorthphn.org.au).**

## GPs and travellers advised to be aware of MERS

Metro North Public Health Unit encourages GPs to be aware of the risk of Middle East Respiratory Syndrome (MERS) in patients attending and returning from the Muslim pilgrimage Hajj in Saudi Arabia this August.

Approximately 3000 Australians travel to the Kingdom of Saudi Arabia each year for the annual Muslim pilgrimage, which is experiencing an ongoing outbreak of MERS, associated with infections in healthcare facilities and exposure to camels and camel products.

MERS is a viral respiratory illness caused by MERS coronavirus and has a high fatality rate. People with existing health conditions that make them more vulnerable to respiratory disease are at a higher risk of becoming very unwell or dying due to MERS.

**GPs are encouraged to discuss with travellers how they can protect themselves from MERS:**

- avoid close contact with sick people and sick animals
- wash hands regularly and take particular care when visiting places where animals are present
- avoid consuming raw or undercooked camel products, such as meat, urine and milk, and
- people with existing health problems should also avoid all contact with camels.

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**More information for both travellers and health professionals can be found at <http://bit.ly/DoH-MERS>.**

# RAP formalises commitment to reconciliation



Pictured above from left: : Rebecca Johnson, Indigilez Women's Leadership and Support Group, PHN CEO Abbe Anderson, Indigenous performer Aaron Ruska from the Nunukul Yuggera Aboriginal Dance Company, PHN Board Chair Dr Anita Green, Gubbi Gubbi Traditional Owner Maurice Serico.

In June, Aboriginal Elders, Traditional Owners, service providers and community leaders gathered in North Lakes for the launch of Brisbane North PHN's first Reconciliation Action Plan (RAP).

The 'Reflect' RAP formalises Brisbane North PHN's ongoing commitment to reconciliation and social change.

Endorsed by Reconciliation Australia just prior to National Reconciliation Week, the Reflect RAP describes the practical actions the PHN will explore to continue our reflection and learning about how to build a health system that is culturally responsive and inclusive for all. Our Reflect RAP will deepen our knowledge, understanding and commitment to Reconciliation, and will create a collective vision for our organisation that all staff and board members connect with and understand.

Our RAP will contribute towards strengthening relationships, opportunities and building respect between Aboriginal and Torres Strait Islander people and other Australians.

Brisbane North PHN Board Chair Dr Anita Green said she was humbled and very pleased that so many people of First Nations heritage had joined the PHN for its RAP launch.

"We are deeply committed to reconciliation and recognise that it is essential to achieving a culturally responsive and inclusive health system," Dr Green said.

"Our RAP will help guide the PHN on its reconciliation journey, by providing our Board and staff with a list of measureable actions to complete over the course of the next year," she said.

"We understand that Aboriginal and Torres Strait Islander peoples have significantly poorer health and social well-being outcomes, including shorter life expectancy, than the rest of the population in our region.

"We are also very aware of the negative influence racism has on the social and emotional wellbeing of Aboriginal and Torres Strait Islander peoples.

"Together, working in partnership with Aboriginal Community Controlled Health Services and mainstream medical services, we can turn this situation around.

"I commend our staff for their contributions to our RAP, which I am sure will have a profound impact on our organisation and our community," Dr Green said.

The PHN launched its Reflect RAP with a ceremony on 14 June 2019 at North Lakes Town Park.

Invited speakers included Maurice Serico, representing the Gubbi Gubbi Traditional Custodians of the land around North Lakes, and Rebecca Johnson, who spoke on behalf of the Aboriginal and Torres Strait Islander and LGBTIQ+ implementation teams for the National Suicide Prevention Trial.

**To view the PHN's Reflect RAP (June 2019 – June 2020) visit <http://bit.ly/2wZ2xBj>.**



## Metro North trials new Redbook cover for Indigenous families

Indigenous babies born in Brisbane north will be able to track their first year of healthcare with a unique record book.



Baby Teddy pictured with the new Redbook cover. Teddy's mum, Nicole Moller, is a proud descendant of the Bundjalung people in northern New South Wales.

The Redbook for newborns has been designed with a new cover by artist Ronald Abala (Wulukantha – little spirit man) especially for infants born within the Ngarrama maternity services across Metro North Hospital and Health Service.

The dedicated cover prompts healthcare providers to offer enhanced screening, additional immunisations and referral pathways within the community for children who identify as Aboriginal and/or Torres Strait Islander.

Midwife and nurse Kelly Smith said there were a total of 659 Indigenous births in Metro North in 2018 and the new cover would be used to assist accurate identification.

“Over 1,000 copies will be provided to Aboriginal and/or Torres Strait Islander children over the next 12 months,” she said.

“Our aim is for the covers to be used as a visual prompt for health professionals to the identification of the child at regular antenatal and postnatal appointments,” Ms Smith said.

The covers are part of a broader campaign initiated in 2016 to improve the health outcomes of Queensland's Aboriginal and Torres Strait Islander population.

The Accurate Indigenous Identification campaign is designed to highlight the importance of Aboriginal and/or Torres Strait Islander patients to identify when accessing Metro North hospitals and facilities.

Director of the Aboriginal and Torres Strait Islander Health Unit Paul Drahm said Aboriginal and Torres Strait Islander people are under-identified in many health-related data collections.

“The accurate identification of Aboriginal and Torres Strait Islander patients in our data collection systems help us to achieve improving health outcomes by supporting the measurements of the Indigenous health status and the effectiveness of intervention programs,” Paul said.

The initiative is part of a clinical focus area – Strong Start to Life – in the *Metro North Hospital and Health Service Better Together Aboriginal and Torres Strait Islander Health Plan 2019-2022* which was launched at the Metro North Caboolture NAIDOC Family Fun Day in July.

## Community gathers for the NAIDOC week yarning circle

Last month Brisbane North PHN team members attended the NAIDOC week Caboolture family fun day, hosted by Metro North Hospital and Health Services, Aboriginal and Torres Strait Islander Health Unit, Community and Oral Health and St Columban's College.

The engaging community event was MC'ed by suicide prevention and mental health advocate, Joe Williams and health staff, Elders and community engaged in 'Conversations with Metro North Yarning Circle'.

Within the yarning circle, community members were invited to give feedback on how health services can work towards Aboriginal and Torres Strait Islander patients having a comfortable and culturally appropriate experience throughout their hospital stays and visits.

Brisbane North PHN's Deputy CEO Libby Dunstan said the event offered a great chance to have meaningful dialogue with Elders and community members.

“It provides us the chance to continue our work towards a common goal of culturally appropriate health services across the region. It was great to just meet and talk to people face to face from across the sector,” Ms Dunstan said.

Music and dancing was enjoyed on the day with the local Torres Strait group, Black Drum Productions stamping up a storm. Thanks to everyone who helped to put this event together.





# News in brief

## ▶ Referral process for children with mental health needs

**The Child and Youth Mental Health Service (CYMHS) assists children and young people up to the age of 18 who have severe and complex mental health needs. Many CYMHS clients are struggling with anxiety, depression, their attachment relationships, eating disorders, school refusal, psychosis, trauma, suicidal and/or self-harming behaviours.**

CYMHS offers assessment, treatment and case management and does not require a mental health care plan.

CYMHS is offering in-practice education sessions to provide more information on the referral criteria and process. For more information or to host an education session contact Sarah Pflanz on **07 3310 9444**.

## ▶ Reaching more eligible people for cancer screening

**The National Cancer Screening Register (NCSR) is an integral part of the cervical screening pathway and plays a role in improving participation in the National Cervical Screening Program. The NCSR integrates with government data sets which, for the first time, enables the identification of never-screened eligible persons in Australia.**

The Department of Health is currently planning a broader campaign for the dissemination of invitations to eligible never-screened and under-screened people over the age of 30 to assist the uptake of cervical screening tests and maximise participation.

For more information email [cancerscreeningengagement@health.gov.au](mailto:cancerscreeningengagement@health.gov.au).

## ▶ Measles vaccination catch-up guide for Australian Immunisation Providers

**Australia has experienced an increase in reported measles cases in 2019, associated with a 300 per cent increase in cases globally, confirming the need to ensure protection against the disease through vaccination.**

The Australian Immunisation Handbook recommends that two doses of a measles-containing vaccine are required for protection against measles.

NCIRS has developed a guide to assist immunisation providers with decisions regarding measles vaccination catch-up for the Australian community.

Download the catch-up guide via <http://bit.ly/NCIRS-measlescatchup>.

## ▶ Gain new referrals from the Butterfly National Helpline

**With the recent announcement of a dedicated single Medicare Benefits Scheme item number for eating disorder treatment for those with severe and complex illness, the Butterfly Foundation expects the demand for practitioners with an understanding of eating disorders to increase as more people gain access to affordable and appropriate eating disorders treatments.**

The Butterfly National Helpline aims to provide appropriate referrals to professionals screened for an understanding of eating disorders and any health professional or service operating in Australia can apply.

To apply please visit <http://bit.ly/BF-referralatabase>.

## ▶ New vaccine storage guidelines edition available now

**This resource provides up to date information about safe vaccine storage and key recommendations for effective vaccine storage management, including new supporting resources for immunisation providers.**

Hard copies of the *National Vaccine Storage Guidelines, Strive for 5*, 3rd Edition booklet and the supporting resources are currently being posted to immunisation providers, and additional copies will be available for download or order at [www.health.gov.au/immunisation](http://www.health.gov.au/immunisation).

# Noticeboard

Please contact the relevant organisation for more information about the items below.

## Share stories of implementing preventive care

The RACGP's Green Book Resources highlights the practical case studies and stories that Australian general practices have undertaken to successfully implement preventive activities for their practice population.

The RACGP would like to continue to showcase the creative and innovative initiatives that general practices are undertaking to improve the health of Australians and are encouraging all members of the general practice team to share tips and stories of preventive activities you have implemented in the clinic.

To submit your case study visit <http://bit.ly/RACGP-greenbook> and describe the quality improvement activities you have undertaken to support preventive care.

## Providing end of life care for residents

End of Life Directions for Aged Care (ELDAC) is a free, government-funded resource designed to connect you with evidence-based tools and resources in palliative care and advance care planning.

The ELDAC Residential Aged Care toolkit has been developed by the University of Technology Sydney with palliative and aged care experts to assist staff working in residential aged care facilities to provide information and resources on providing palliative care and advance care planning.

For more information visit <https://www.eldac.com.au> or call **1800 870 155**.

## Expressions of interest invited

The Black Dog Institute is seeking expressions of interest from GPs to join their GP advisory group. The purpose of the GP Advisory Group is to provide insight and advice to inform the design, development and implementation of Black Dog Institute's current and emerging services for GPs.

The Black Dog Institute aims to have varied representation in the advisory group. It is not necessary for GPs to have an interest in mental health to become a member of the advisory group.

To learn more or to submit an expression of interest visit <http://bit.ly/blackdog-EOI>.

## GPs invited to take part in research on health assessments for older people

Monash University is conducting research into the *Attitudes of health professionals to older person health assessments*.

GPs or practice nurses who could conduct Medicare-funded older person health assessments are invited to take part in the online survey. The survey should take five minutes to complete. For more information visit <http://bit.ly/monash-research>.

## Provide your input into the Guidelines for the Treatment of Alcohol Problems

The University of Sydney is seeking your input for the next edition of the *Guidelines for the Treatment of Alcohol Problems*. Funded by the Commonwealth Department of Health, the five minute survey is open to all health professionals in Australia.

The survey will ask respondents about their experiences with addressing alcohol-related problems, preferences for accessing information, how we can best present the updated guidelines, and what additional training or resources should be made available.

To complete the survey visit <http://bit.ly/UoS-survey>.

## Mental health care at the Mater

The Emotional Health Unit at the Mater Young Adult Health Centre Brisbane delivers specialist mental healthcare to young adults aged 16 – 25, which is evidence based and consumer driven.

The Mater Young Adult Health Centre Brisbane provides specialist mental health care through the three integrated services, including a private inpatient unit, education sessions for recovery and treatment and therapy with private clinicians.

For more information call **07 3163 6102** or visit [mater.org.au/emotionalhealthunit](http://mater.org.au/emotionalhealthunit).

# Metro North Health Forum

Wednesday 16 October 2019

9.00 am – 4.00 am

Royal International Convention Centre  
Bowen Hills, Brisbane

Hosted by Metro North Hospital and Health Service and Brisbane North PHN, the forum program will focus on the theme, *Our way to wellbeing.*

For more information or to register online, visit: [www.health2gether.org.au](http://www.health2gether.org.au)

## 50 per cent of exhibition space sold

The 2019 Metro North Health Forum will feature an exhibition of local for-profit and not-for-profit health organisations. Among those exhibitors already confirmed are Angels in Aprons, BallyCara, Communiq, Metro North Mental Health – Alcohol and Drug Service, My Health for Life and Suncare Community Services. Visit [www.health2gether.org.au](http://www.health2gether.org.au) to download the exhibition prospectus.



## GP breakfast briefing | 7.00 am – 9.00 am

The GP breakfast briefing will be an opportunity to hear about the latest initiatives for general practice, and how both organisations are working together to support GPs and their patients to navigate the health system and improve their wellbeing. It also presents a networking opportunity for general practice staff. Visit [www.health2gether.org.au](http://www.health2gether.org.au) to register now.



The Metro North Health Forum is a joint initiative between Metro North Hospital and Health Service and Brisbane North PHN



# What's on elsewhere

Please contact the relevant organisation for more information about these events. Note, these are not Brisbane North PHN events.

For more events, visit [brisbanenorthphn.org.au/page/news-and-events/events](http://brisbanenorthphn.org.au/page/news-and-events/events).

## August 2019

- 01 ASPOG 2019 – Australian Society for Psychosocial Obstetrics & Gynaecology**  
Parkville, VIC  
e [admin@aspog.org.au](mailto:admin@aspog.org.au)
- 03 Creative careers in medicine conference – Creative Careers in Medicine**  
Gold Coast, Qld  
e [hello@creativecareersinmedicine.com](mailto:hello@creativecareersinmedicine.com)
- 03 Assessment and management of low back pain – Australian Association of Musculoskeletal Medicine**  
Stafford, Qld  
e [aamm.cert@gmail.com](mailto:aamm.cert@gmail.com)
- 03 GP certificate 1 day skin cancer workshop – The Australasian College of Dermatologists**  
Annerley, Qld  
e [kirsty@dermcoll.edu.au](mailto:kirsty@dermcoll.edu.au)
- 06 Immunisation catch up for practice nurses – Brisbane North PHN**  
North Lakes, Qld  
e [aimie.thomson@brisbanenorthphn.org.au](mailto:aimie.thomson@brisbanenorthphn.org.au)
- 08 Wesley LifeForce suicide prevention practice staff workshop – Wesley Mission Qld**  
Ashgrove, Qld  
e [mary.mcnamara@wesleymission.org.au](mailto:mary.mcnamara@wesleymission.org.au)
- 09 Effective brief contact or single session bereavement – Australian Centre for Grief and Bereavement**  
Brisbane City, Qld  
e [education@grief.org.au](mailto:education@grief.org.au)

- 10 Managing bipolar disorder – Black Dog Institute**  
Brisbane City, Qld  
e [education@blackdog.org.au](mailto:education@blackdog.org.au)
- 10 Wesley LifeForce suicide prevention GP and nurse workshop – Wesley Mission Qld**  
Ashgrove, Qld  
e [mary.mcnamara@wesleymission.org.au](mailto:mary.mcnamara@wesleymission.org.au)
- 20 Immunisation catch up for practice nurses – Brisbane North PHN**  
Lutwyche, Qld  
e [aimie.thomson@brisbanenorthphn.org.au](mailto:aimie.thomson@brisbanenorthphn.org.au)
- 22 Supporting and communicating with the bereaved – Australian Centre for Grief and Bereavement**  
Brisbane City, Qld  
e [education@grief.org.au](mailto:education@grief.org.au)
- 28 Dementia essentials: Providing support to people living with dementia – Dementia Australia**  
North Lakes, Qld  
e [QLD.Education@dementia.org.au](mailto:QLD.Education@dementia.org.au)
- 30 Hitting the mark in private practice – AMA Qld**  
Bowen Hills, Qld  
e [registrations@amaq.com.au](mailto:registrations@amaq.com.au)

## In the community

- 4 – 10 August National EOS Awareness Week**
- 5 – 11 August Sleep Awareness Week**
- 8 August Top 8 Challenge Day**
- 19 – 25 August Natural Fertility Awareness Week**
- 19 – 25 August Be Medicinewise**

# GP bulletin – August 2019

News from General Practice Liaison Officers at Brisbane North PHN and Metro North Hospital and Health Service.

Any feedback or suggestions please send to [mngplo@health.qld.gov.au](mailto:mngplo@health.qld.gov.au). Please share with your GP colleagues.

## HealthPathways update

### Newly released HealthPathways:

- febrile seizures in children
- headaches in children and youth
- non-acute asthma in children
- coeliac disease in children and youth
- HIV – screening and diagnosis
- HIV – prophylaxis (post and pre exposure)
- reflux and GORD in children and youth
- poor growth.

To submit feedback about HealthPathways, please contact [administration.integration@brisbanenorthphn.org.au](mailto:administration.integration@brisbanenorthphn.org.au).

Login at: [brisbanenorth.communityhealthpathways.org](http://brisbanenorth.communityhealthpathways.org) or phone 07 3630 7300 for login details.

## GP education

- **3 August** – Maternity workshop – Royal Brisbane and Women's Hospital
- **12 September** – Common challenges in primary care: Heart failure – The Prince Charles Hospital
- **12 October** – Paediatric masterclass for general practice – Queensland Children's Hospital
- **26 October** – Metro North GP alignment program: gynaecology workshop – Royal Brisbane and Women's Hospital.

Visit <http://bit.ly/phnevents> for upcoming education events.

## New inflammatory bowel disease helpline

Redcliffe has started a new helpline for patients with existing or previous diagnosis of inflammatory bowel disease (IBD). Unconfirmed IBD should be referred through to outpatients via the preferred electronic referral process.

Call the Redcliffe Hospital IBD helpline on **07 3049 9738**.

## Bowel cancer screening for older patients

Australia has one of the highest rates of bowel cancer in the world and the screening rate in the Metro North region sits at less than 50 per cent of all eligible patients.

For this reason, GPs should encourage patients to take part in the screening program, which should be done every two years from 50–74 years old. Patients will receive the pack within 6 months of their birthday and if they don't they can call the information line on **1800 118 868**.

## Saturday appointments now available at BreastScreen Queensland

BreastScreen Queensland are now offering Saturday screening appointments and encourage all eligible women, in particular those aged between 50–74 years, to make an appointment at one of the many BreastScreen Queensland services.

A breast screen is the most effective method of detecting breast cancer at a very early stage even before a lump can be felt or seen. Saturday screening appointments are now available at Chermside and Indooroopilly. To make an appointment call **13 20 50**.

## Influenza notifications

With influenza notification rates in the North Brisbane and Moreton Bay region much higher than this time last year, it can be useful to show patients unsure about immunisation the Queensland Health weekly surveillance flu reports. Access these at [www.bit.ly/qhflu2019](http://www.bit.ly/qhflu2019).

Data on all public health notifiable conditions is available via [www.bit.ly/qhnotifications](http://www.bit.ly/qhnotifications).

## Pathology results uploaded to MyHealthRecord

Within the North Brisbane and Moreton Bay region over 180,000 finalised pathology results and over 8,000 discharge summaries were uploaded in May 2019.

GPs should be aware that patients will be able to see their pathology results uploaded within seven days of their test. This may mean the patient can see their results without interpretation and prior to their follow up.

For more information visit <http://bit.ly/MHR-GPs>.

## The preferred way to send outpatient referrals

Practices are increasingly sending referrals via Medical Objects or Health Link from their practice software. This process provides practices with a receipt when the referral is received by Metro North Hospital and Health Service, and this process is much quicker than a faxed referral.

For support setting up referral software contact your Brisbane North PHN Primary Care Liaison Officer via [www.bit.ly/bnphnpclo](http://www.bit.ly/bnphnpclo).